

The Hawaii Alternatives to Seclusion and Restraint Project Preliminary Report

Cultures of Engagement in Residential Care (CERC)

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ABSTRACT

The State of Hawaii Child and Adolescent Mental Health Division (CAMHD) has identified reduction in the use of coercive behavioral control methods, such as restraint and seclusion, as a high priority area for practice development. An intervention project to develop positive alternatives to these methods, funded by a three-year grant from the federal Substance Abuse and Mental Health Administration (SAMHSA), is now underway. The Project, called: “Cultures of Engagement in Residential Care” (CERC) includes several components:

1. Formal training for providers of residential care in the CAMHD system,
2. The formation of a peer network among residential care providers, and
3. Intensive technical assistance and training interventions by a psychologist-led “Positive Alternatives Team.” The team intervention will be provided in a subset of 4–6 residential care settings over the grant period.

This poster presentation provides a detailed description of the CERC project and a progress report on the first year’s activities, including preliminary evaluation data.



Hawaii is One of Eight States to Receive SAMHSA Funding through a State Infrastructure Grant (SIG) Program Focused on Reduction of Seclusion and Restraint

- Goals of the CERC project include:
 - Create and sustain non-coercive organizational cultures in residential treatment programs.
 - Develop staff at all levels of the CAMHD system.
 - Enhance the infrastructure of the CAMHD system in ways that will be comprehensive and sustainable.

CERC Project Component 1

- A 2-day “kick-off” training event for the project was held in September 2005 in Honolulu.
 - A national faculty presented exciting material developed by the National Technical Assistance Center (NTAC) of the National Association of State Mental Health Program Directors (NASMHPD).
 - More than 60 Representatives from CAMHD provider agencies attended.



CERC Project Component 2

- ✓ A “Best Practices in Residential Care Network” is being organized.
 - At least 10 Agencies have agreed to send representatives to the first network meeting on November 4th.
 - The network will provide opportunities for sharing among peers and collaborative problem-solving around areas of common concern.



CERC Project Component 3

- An on-site technical assistance intervention will be provided at 4 to six agencies over the next two years by a “Positive Alternatives Team” or PAT.
 - The team will work with two agencies at a time for a period of about 7 months.
 - The team will be led by a CAMHD psychologist and will include a staff member from each of the two agencies.



Hawai'i CERC Project: Cultures of Engagement in Residential Care

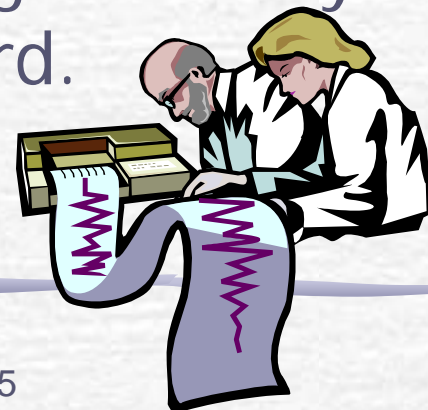


NTAC Core Strategies

1. Leadership towards organizational change
2. Invite and include consumers and families
3. Use data to inform practice
4. Develop your workforce
5. Implement assessment and prevention tools
6. Make debriefing rigorous

Evaluation and Data Collection are Important Aspects of the CERC Project

- The Hawaii project is part of a national effort to collect data on the use of the NTAC “Six Core Strategies”™ approach to reducing the use of Restraint and Seclusion.
- We’ll be collecting data on change at many levels as the project goes forward.



Initial Data On CAMHD-System Attitudes Related to Seclusion and Restraint

- ✿ Sixty-seven individuals completed attitude questionnaires at the CERC project “kick-of” training event, September 14 & 15, 2005.
- ✿ This included 30 (46.9%) who reported providing direct clinical services and 34 (53.1%) who reported they do not provide clinical services.



Item Level Results for All Respondents on the CERC Attitudes Questionnaire Seclusion & Restraint Scale Items

			0	1	2	3	Valid Response
	Mean	SD	%	%	%	%	%
I work very hard to prevent crises, and to avoid having to “put hands on youth.”	2.9	.43	1.5	0.0	6.0	92.5	97.1
Often the use of seclusion and restraint is not advisable because of the youth’s trauma history.	2.6	.78	4.5	1.5	19.4	71.6	97.1
I am confident that we can help youth with behavioral challenges without using restraint or seclusion.	2.6	.57	0.0	4.4	27.9	67.6	98.6
We use seclusion only as a last resort, when there is risk of imminent harm.	2.4	.94	9.8	1.6	23.0	65.6	88.4

Note. 0 = Disagree, 1 = Somewhat Disagree, 2 = Somewhat Agree, 3 = Agree.

Item Level Results for All Respondents on the CERC Attitudes Questionnaire Seclusion & Restraint Scale Items

			0	1	2	3	Valid Response
	Mean	SD	%	%	%	%	%
A well structured environment and positive behavioral supports are sufficient to maintain a safe, therapeutic environment.	2.1	1.0	13.0	10.1	31.9	44.9	100
It is inhumane to seclude or restrain clients.	1.9	.97	8.7	26.1	31.9	33.3	100
The use of seclusion and restraint should be viewed as a treatment failure.	1.8	.94	11.6	18.8	44.9	24.6	100
When used properly, seclusion and restraint may play an important role in client care.	1.6	1.0	19.4	20.9	37.3	22.4	97.1

Note. 0 = Disagree, 1 = Somewhat Disagree, 2 = Somewhat Agree, 3 = Agree.

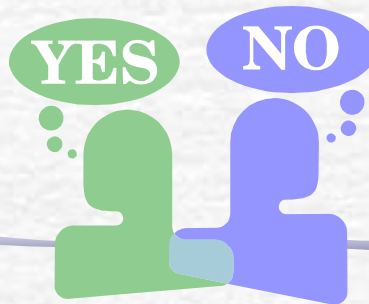
Item Level Results for All Respondents on the CERC Attitudes Questionnaire Seclusion & Restraint Scale Items

			0	1	2	3	Valid Response
	Mean	SD	%	%	%	%	%
Very often there is no alternative open to me; I am forced to restrain a youth.	.74	.95	53.0	27.3	12.1	7.6	95.7
Rigidly enforcing strict rules keeps clients and staff away from harm.	1.2	.90	24.6	37.7	30.4	7.2	100
Restraining a youth can be a good way to teach her or him a lesson.	.32	.72	79.4	11.8	5.9	2.9	98.6
I've seen lots of youth benefit from strict limits, including the use of seclusion.	.97	.95	42.6	20.6	33.8	2.9	98.6

Note. 0 = Disagree, 1 = Somewhat Disagree, 2 = Somewhat Agree, 3 = Agree.

Results of Initial Attitude Data Collection

- Although many of the people working in the CAMHD system have adopted the view that coercive behavioral control approaches are not useful, there was a sizeable minority who held the view that Seclusion and Restraint are necessary and potentially helpful, at the start of the CERC project.
- Additional testing of people in the field is planned at the end of the three-year project, and should help us learn whether or not this effort had wide-ranging effects.



CERC Project Components

- The CERC Project Web-site is up and running

[http://www.hawaii.gov/health/
mental-health/camhd/library/webs/
cerc/cerc.html](http://www.hawaii.gov/health/mental-health/camhd/library/webs/cerc/cerc.html)





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